Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

| CLAIMS AS FILE<br>(Co   |  |   |                                       |              |                              |                  | SMALL EN            | OR                     | OTHER THAN |                     |           |                   |
|---|--|---|---------------------------------------|--------------|------------------------------|------------------|---------------------|------------------------|------------|---------------------|-----------|-------------------|
| TOTAL CLAIMS  |  |   |                                       |              |                              |                  | RATE                | FEE                    | 1          | RATE                |           |                   |
| FOR   |  |   | NUMBER FILED                          |              | NUMBER EXTRA                 |                  | BASIC FEE           | 375.00                 | OR         | BASIC FEE           | 750       |                   |
| TOTAL CHARGEABLE CLAIMS   |  |   | <b>35</b> minus 20=                   |              | *                            |                  | X\$ 9=              |                        | OR         | X\$18=              |           |                   |
| IND   | EPENDENT CL                                    | AIMS                                      | 3 minus 3 =                           |              | * Y                          |                  | X42=                |                        | OR         | X84=                |           |                   |
| MU  | LTIPLE DEPEN                                   | DENT CLAIM PI                             | RESENT                                |              |                              |                  | +140=               |                        | OR         | +280=               | ı         |                   |
| * If  | the difference                                 | in column 1 is                            | less than zero, enter "0" in column 2 |              |                              | olumn 2          | TOTAL               |                        | OR         | TOTAL               | 75        | 0.                |
| CLAIMS AS AMENDED - PART  |  |   |                                       |              | T II                         |                  |                     |                        |            | OTHER               |           |                   |
|   |  | (Column 1)                                |                                       | (Column 2)   |                              | (Column 3)       | SMALL               |                        | OR         | SMALL               |           |                   |
| AMENDMENT   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | NUM<br>PREVI | BER<br>OUSLY<br>FOR          | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                | TIO       | DI-<br>NAL<br>EE  |
| NDN   | Total  | * 31                                      | Minus                                 | ** 3         | 5                            | =                | X\$ 9=              |                        | OR         | X\$18=              |           |                   |
| AME   | Independent                                    |   |                                       |              |                              | = 4              | X42=                |                        | OR         | X84=                | 33        | 36                |
| لـــا   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                       |              |                              |                  | +140=               |                        | OR         | +280=               |           |                   |
|   |  |   |                                       |              |                              |                  | TOTAL<br>ADDIT. FEE | -                      | OR         | TOTAL<br>ADDIT. FEE | <i>33</i> | 6.                |
|   |  | (Column 1)                                |                                       | (Colu        | mn 2)                        | (Column 3)       | ADDIT: TEE          |                        |            | ADDIT: I EE         |           |                   |
| AMENDMENT   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | NUN<br>PREVI | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                | TIO       | DI-<br>NAL<br>EE  |
| NDW   | Total  | *   | Minus                                 | **           |                              | =                | X\$ 9=              |                        | OR         | X\$18=              |           | ·                 |
| AME   | Independent                                    | *   | Minus                                 | ***          | = 0. 4.14                    | -                | X42=                |                        | OR         | X84=                |           |                   |
| L   | FIRST PRESE                                    | NTATION OF MI                             | JLTIPLE DEF                           | ENDEN        | I CLAIM                      |                  | +140=               |                        | OR         | +280=               |           |                   |
|   |  |   |                                       |              |                              |                  | TOTAL               |                        | OB.        | TOTAL               |           |                   |
|   |  |   | •                                     |              | ٠.                           | (0.1             | ADDIT. FEE          |                        | On         | ADDIT. FEE          |           |                   |
| -   |  | (Column 1)<br>CLAIMS                      |                                       |              | mn 2)<br>HEST                | (Column 3)       |                     | 4001                   | <b>l</b> ; |                     |           |                   |
| AMENDMENT   |  | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUN<br>PREV  | MBER<br>IOUSLY<br>FOR        | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                | TIO       | DDI-<br>NAL<br>EE |
|   | Total  | *   | Minus                                 | **           |                              | =                | X\$ 9=              |                        | OR         | X\$18=              |           |                   |
|   | Independent                                    | *   | Minus                                 | ***          | T 01 4114                    | =                | X42=                |                        | OR         | X84=                |           |                   |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                       |              |                              |                  | +140=               |                        | OR         | +280=               |           |                   |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                                       |              |                              |                  |                     |                        |            | TOTAL               | -         |                   |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                                       |              |                              |                  |                     |                        |            |                     | ,         |                   |

**Application or Docket Number** 

## PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998

| Ellective Indvertiber 10, 1990                               |  |  |                       |   |                  |               |                                     |       |                     |                        |
|--|--|--|-----------------------|---|------------------|---------------|-------------------------------------|-------|---------------------|------------------------|
| CLAIMS AS FILE<br>(Column                                    |  |  |                       | (Colu   | mn 2)            | small<br>Type | ENTITY                              | OR    | other<br>Small      |                        |
| FC   | PR   | וטא                                    | MBER FILED            | EXTRA   | RATE             | FEE           |                                     | RATE  | FEE                 |                        |
| ВА   | SIC FEE  |  |                       |   |                  |               | 380.00                              | OR    |                     | 760.00                 |
| то   | TAL CLAIMS   |  | ζ minus 20=  *        |   |                  | X\$ 9=        |                                     | OR    | X\$18=              |                        |
| INDEPENDENT CLAIMS minus 3 = *                               |  |  |                       | 3 =  *  |                  | X39=          |                                     | OR    | X78=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT                             |  |  |                       |   | +130=            |               | OR                                  | +260= |                     |                        |
| * If   | the difference   | TOTAL                                  |                       | OR  | TOTAL            | 7/20          |                                     |       |                     |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |  |  |                       |   |                  |               | OTHER T<br>SMALL ENTITY OR SMALL ER |       |                     | THAN                   |
| AMENDMENTA   | 2 (No. 1)  | CLAIMS<br>REMAININ<br>AFTER<br>AMENDME | lG (                  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR   | PRESENT<br>EXTRA | RATE          | ADDI-<br>TIONAL<br>FEE              |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | <b>*</b>                               | Minus                 | <b>#</b> #                                    | =                | X\$ 9=        |                                     | OR    | X\$18=              |                        |
| S C C C C C C C C C C C C C C C C C C C                      | Independent  | ☆                                      | Minus                 | ti fich                                       | =                | X39=          |                                     | OR    | X78=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |                       |   |                  | +130=         |                                     | OR    | +260=               |                        |
|  |  |  |                       |   |                  |               |                                     | OR    | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 3)                             | ADDIT. FEE            |   | 2 <b>.</b>       |               |                                     |       |                     |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAININ<br>AFTER<br>AMENDME | lG                    | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR   | PRESENT<br>EXTRA | RATE          | ADDI-<br>TIONAL<br>FEE              |       | RATE                | ADDI-<br>TIONAL<br>FEE |
| 202  | Total  | ź.                                     | Minus                 | **  | =                | X\$ 9=        |                                     | OR    | X\$18=              |                        |
| S CALLE  | Independent  | <b>*</b>                               | Minus                 | <del>***</del>                                | =                | X39=          |                                     | OR    | X78=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |                       |   |                  | +130=         |                                     | OR    | +260=               |                        |
|  |  |  | TOTAL                 |   |                  | TOTAL         |                                     |       |                     |                        |
|  |  | ADDIT. FEE                             | : (                   | 2)  | ADDIT. FEE       | <u></u>       |                                     |       |                     |                        |
| AMENDMENT C  |  | (Column CLAIMS REMAININ AFTER AMENDME  | NG                    | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA    | RATE          | ADDI-<br>TIONAL<br>FEE              |       | RATE                | ADDI-<br>TIONAL<br>FEE |
| E OP   | Total  | <b>*</b>                               | Minus                 | **  |                  | X\$ 9=        |                                     | OR    | X\$18=              |                        |
| SA EE  | Independent  | *                                      | Minus                 | ***   | =                | X39=          |                                     |       | X78=                |                        |
|  | FIRST PRESE  | /100=                                  | }                     | OR  |                  | <b>}</b>      |                                     |       |                     |                        |
|  | If the entry in colu   | mn 1 je lace tl                        | han the entry in colu | +130=   |                  | OR            | +260=                               |       |                     |                        |
| **   | If the "Highest Nu   | mber Previou                           | sly Paid For" IN THI  | " TOTAL<br>ADDIT. FEE                         |                  | OR            | TOTAL<br>ADDIT. FEE                 |       |                     |                        |
|  | ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |                       |   |                  |               |                                     |       |                     |                        |